

Statewide Trauma Advisory Council

The RSA Tower, Conference Room 1586

Meeting Minutes

Monday, November 5, 2007

Advisory Council	Chief Billy Pappas, Dr. John Vermillion, Dr. Rony Najjar, Dr. Loring Rue, Dr. Alzo Preyear, Beth Anderson, Allen Foster, Gary Gore, Dr. John Campbell, Dr. Donald Williamson
Phone	Bryan Kindred
Guest	Chris Osborne, benefactor of the Trauma System
Presiding	Dr. Donald Williamson

Agenda Topic:

Welcome/Introduction

Dr. Williamson opened meeting with a welcome. Each council member introduce themselves and the association they are representing.

Dr. Williamson introduced Chris Osborne, a benefactor of the Trauma System in the Birmingham Region. Chris was struck by a hit & run driver and was left for dead on July 15, 2004. A good samaritan stopped to help by calling 911. Within minutes the ambulance was on the scene, a helicopter was on standby and he survived this tragic ordeal. Chris had his left leg amputated above the knee and now works for the Red Cross.

The floor was opened for the questions for Chris.

Agenda Topic:

Trauma System Overview

Dr. Williamson turned this part of the meeting over to Dr. Campbell to give an overview of the Trauma System. Dr. Campbell used a power point presentation to give key points about the system.

- ❖ The model trauma system is a voluntary system started 1996 in Birmingham
- ❖ Trauma centers are selected hospitals that provide full range of care
- ❖ The trauma system involves EMS team working together to get the patient to the hospital in a short time frame.
- ❖ A trauma patient is any patient injured with head trauma, Shock and other identified trauma conditions that need care within the first hour (the golden hour).
- ❖ Alabama Trauma is 4th highest in rank with highway trauma death in the USA per year with 30% happening in rural areas.
- ❖ What needed in the trauma system?
 - A. network of hospitals (voluntary)
 - B. a plan
 - C. constant monitoring
- ❖ Statewide Trauma Communication Center (TCC)

- A. Will route patients to closest appropriate ready Trauma Center
- B. all hospitals will be connected
- C. arrange transportation air or ground

Alabama will be on the only state that will have a TCC.

The floor was opened to address Dr Campbell's power point related to the Trauma System.

Dr. Campbell used a power point presentation to show who qualifies to go into the Trauma System.

The floor was open for questions.

Agenda Topic:

Establish Meeting Rules

- ❖ All were in favor to use the Alice Sturgis Code of Parliamentary Procedure.
Dr. Preyear seconds the motion.
- ❖ And all were in favor of the Draft Proxy Rules. (A written proxy must be submitted one day prior to the meeting.) Bryan Kindred second the motion.
- ❖ Ms. Anderson motion to vote on the Patient Protocol at the next meeting.
- ❖ Dr. Najjar motion to amend #3 on the Patient Protocol to the language used by BREMSS & North about the Glasgow Coma Scale in the Patient criteria

Agenda Topic:

Target deadline for system to be operational

The target deadline for the system to be operational is 18 months.

Break

10 min

After the break, Dr. Campbell went over more details regarding the Trauma System operations. Then he covered the differences noted between the American College of Surgeons verses the NATS hospital designations requirement.

